

Supplemental Application Data Sheet

Application Information

<u>Application No.:</u>	<u>10/591,869</u>
<u>Filing Date:</u>	<u>September 6, 2006</u>
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Title::	CLOSURE SYSTEM FOR TUBULAR ORGANS
Attorney Docket Number::	32201-1090
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	2
Small Entity?::	Yes
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Switzerland
Status::	Full Capacity
Given Name::	Michel
Middle Name::	
Family Name::	Bachmann
City of Residence::	Vaux sur Morges

State or Province of Residence::

Country of Residence::

Switzerland

Street of mailing address::

Pré Floret

City of mailing address::

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State or Province of mailing address::

Country of mailing address::

Switzerland

Postal or Zip Code of mailing address::

CH-1126

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Switzerland

Status::

Full Capacity

Given Name::

Christian

Middle Name::

Family Name::

Imbert

City of Residence::

~~Lausanne~~ Froideville

State or Province of Residence::

Country of Residence::

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Street of mailing address::

~~PSE-B.P.O. Box 115~~ Chemin du Maupas 17

City of mailing address::

~~Lausanne~~ Froideville

State or Province of mailing address::

Country of mailing address:

Switzerland

Postal or Zip Code of mailing address::

~~CH-1015~~ CH-1055

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Switzerland

Status::

Full Capacity

Given Name::

Alain

Middle Name::

Family Name:: Jordan
City of Residence:: Lausanne
State or Province of Residence::
Country of Residence:: Switzerland
Street of mailing address:: ~~PSE-B P.O. Box 115~~ PSE-B, EPFL

City of mailing address:: Lausanne
State or Province of mailing address::
Country of mailing address: Switzerland
Postal or Zip Code of mailing address:: CH-1015

Correspondence Information

Correspondence Customer Number:: 35023
Name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Postal or Zip Code of mailing address::
Phone number::
Fax Number::
E-Mail address::

Representative Information

Representative Customer Number::	35023	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
PCT	PCT/CH2004/000136	8 March 2004	YES

Assignee Information

Assignee name:: EndoArt SA
Street of mailing address:: ~~PSE-B P.O. Box 115~~ PSE-B, EPFL

City of mailing address:: Lausanne
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